

NOTICE OF FEE DUE

DATE:	11-01-04				Č;
TO:	11-01-04 Issue Fee				
FROM:	Office of Initial Pater	nt Examination			
SUBJECT:	Fee Duc				
APPLICATIO	ON NUMBER <u>69-93</u>	58-756			
Office for th authorization	for the attached docume the following reason. Plean to charge a deposit according to the following reason.	ase check the application ount. If an author.	ication fo	or the appropriate spresent, please cha	rge the
Insufficie	ent fee by check				
Insufficie	ent funds in deposit amount	ı.			
Declined	credit card	,		·	
Non-auth	orization for charge to depo	osit account			
☐ No fee su	bmitted per requirement				
The correct fee	code: <u>[50]</u>	amo	ount	\$_/370.00	_
The suspended	fee code: 1999	amo	unt	\$	_
Fee Due		amo	unt	=\$ <u>1370.00</u>	
If you have any Eleanor Kurtz 7	questions, please contact (703-308-3642	Cynthia Streater at 7	703-306-5	5430 or	

Terminal Operator